Please type a plus sign (+) inside box → [+]

PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No.	7043-15
First Inventor	S. Samuel DeAth
Title	ANTIMICROBIAL COMPOSITION FORMULATED WITH ESSENTIAL OILS
Express Mail Label No.	001059

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

1. [X] Fee Transmittal Form (e.g., PTO/SB/17) *(Submit an original and a duplicate for fee processing)*
2. [X] Applicant claims small entity status. See 37 CFR 1.27.
3. [X] Specification [Total Pages 15] *(preferred arrangement set forth below)*
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. [] Drawing(s) (*35 U.S.C.113*) [Total Sheets]
5. Oath or Declaration [Total Pages 4]
 a. [] Newly executed (original or copy)
 b. [X] Copy from a prior application (37 CFR 1.63 (d)) *(for a continuation/divisional with Box 18 completed)*
 i. [] DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. [] Application Data Sheet. See 37 CFR 1.76
7. [] CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*
8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
 a. [] Computer Readable Form (CRF)
 b. Specification Sequence Listing on:
 i. [] CD-ROM or CD-R (2 copies); or
 ii. [] paper
 c. [] Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. [] Assignment Papers (cover sheet & document(s))
10. [X] 37 C.F.R.§3.73(b) Statemen [] Power of Attorney *(when there is an assignee)*
11. [] English Translation Document *(if applicable)*
12. [X] Information Disclosure Statement (IDS)/PTO-1449 [] Copies of IDS Citations
13. [] Preliminary Amendment
14. [X] Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
15. [] Certified Copy of Priority Document(s) *(if foreign priority is claimed)*
16. [] Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. [] Other:

18. If a CONTINUING APPLICATION, *check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:*

[] Continuation [X] Divisional [] Continuation-in-part (CIP) of prior application No: 09 / 564,282

Prior application information: *Examiner* Michele C. Flood *Group / Art Unit:* 1651

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

[X] *Customer Number or Bar Code Label* 01059 *(Insert Customer No. or Attach bar code label here)* or [] *Correspondence address below*

PATENT & TRADEMARK OFFICE

Name	TIMOTHY J. SINNOTT				
	BERESKIN & PARR				
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Country	Canada	Telephone	(416) 364-7311	Fax	(416) 361-1398

Name (Print/Type)	Timothy J. Sinnott	Registration No. (Attorney/Agent)	31,083
Signature		Date	November 12, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☑ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT ($) 370.00

Complete if Known	
Application Number	not yet assigned
Filing Date	not yet assigned
First Named Inventor	S. Samuel DeAth
Examiner Name	Michele C. Flood
Group Art Unit	1651
Attorney Docket No.	7043-15

METHOD OF PAYMENT *(check all that apply)*

☑ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account: #3266

Deposit Account Number: 022095

Deposit Account Name: Bereskin & Parr

The Commissioner is authorized to: *(check all that apply)*

☐ Charge fee(s) indicated below ☑ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, **except for the filing fee** to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	370.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) ($) 370.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims		Fee from below		Fee Paid
Total Claims	14 - 20** =		X		=	0.00
Independent Claims	2 - 3** =		X		=	0.00
Multiple Dependent					=	

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) ($) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Large Entity Fee ($)	Small Entity Fee Code	Small Entity Fee ($)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for *ex parte* reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** ($) 0.00

SUBMITTED BY				Complete *(if applicable)*	
Name *(Print/Type)*	Timothy J. Simnott	Registration No. *(Attorney/Agent)*	31,083	Telephone	(416) 364-7311
Signature				Date	November 12, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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